

Alan B. Kane

Alan B. Kane, ESQ., CPA

600 Louis Drive, Suite 201
Warminster, Pennsylvania 18974

Tel (610) 279-5151

Fax (267) 282-5687

E-Mail: akaneesqcpa@msn.com

October 17, 2018

The Honorable Jean K. FitzSimon
United States Bankruptcy Court for
the Eastern District of Pennsylvania
900 Market Street
Philadelphia, PA 19107

RE: Jonathan Barger
Bankruptcy Chapter 13
Docket No.: 18-14725

Dear Judge FitzSimon:

This firm represents the debtor, Jonathan Barger, and Jason Rabinovich, Esquire represents Syndcore Holdings, LLC. in the above referenced matter.

The debtor, Jonathan Barger, objects to the entrance of an Order granting Syndcore Holdings, LLC relief from the automatic stay, and requests an evidentiary hearing. On September 27, 2018, counsel for the debtor, Jonathan Barger, provided a Certificate of Insurance regarding debtor's property located at 2505 Orthodox Street, Philadelphia, Pennsylvania to Jason Rabinovich, Esquire, counsel for Syndcore Holdings, LLC. A true and correct copy of the Certificate of Insurance is attached as Exhibit "A" hereto. On October 10, 2018, the counsel for the debtor, Jonathan Barger, provided a letter from the underwriter regarding the insurance coverage for debtor's property located at 2505 Orthodox Street, Philadelphia, Pennsylvania to Jason Rabinovich, Esquire, counsel for Syndcore Holdings, LLC. A true and correct copy of the Certificate of Insurance is attached as Exhibit "B" hereto. The letter specifically provides:

We are aware of the contents of the property, specifically the chemicals that are used in the nature of your business, and want to inform you that this does not limit the policy coverage."

The letter states that StateFarm is aware of the chemicals being used at the property and nowhere in the letter does it indicate that there any exclusion for such chemicals. The letter provides to the contrary of any exclusion as the letter states that there is

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no limitation regarding policy coverage as a result of the chemicals being used at the property.

At the hearing, the debtor will introduce expert testimony regarding the policy coverage. A hearing is scheduled for November 14, 2018 regarding this matter.

Respectfully submitted,



Alan B. Kane

ABK/ejf

cc: Jason Rabinovich, Esquire

EXHIBIT "A"

CERTIFICATE OF INSURANCE

This certifies that

- ☒ STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
☐ STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois
☐ STATE FARM FIRE AND CASUALTY COMPANY, Scarborough, Ontario
☐ STATE FARM FLORIDA INSURANCE COMPANY, Winter Haven, Florida
☐ STATE FARM LLOYDS, Dallas, Texas

insures the following policyholder for the coverages indicated below:

Name of policyholder Jonathan P Barger

Address of policyholder 2505 Orthodox St, Philadelphia PA 19137

Location of operations

Description of operations

The policies listed below have been issued to the policyholder for the policy periods shown. The insurance described in these policies is subject to all the terms exclusions, and conditions of those policies. The limits of liability shown may have been reduced by any paid claims.

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY (at beginning of policy period)
		Effective Date	Expiration Date	
98-EL-B207-2	Comprehensive Business Liability	09/26/2018	09/26/2019	BODILY INJURY AND PROPERTY DAMAGE
This insurance includes:	<input type="checkbox"/> Products - Completed Operations			Each Occurrence \$ 1,000,000
	<input type="checkbox"/> Contractual Liability			General Aggregate \$ 2,000,000
	<input type="checkbox"/> Underground Hazard Coverage			Products - Completed Operations Aggregate \$ 2,000,000
	<input type="checkbox"/> Personal Injury			
	<input type="checkbox"/> Advertising Injury			
	<input type="checkbox"/> Explosion Hazard Coverage			
	<input type="checkbox"/> Collapse Hazard Coverage			
	<input checked="" type="checkbox"/> Building \$335,000			
	<input type="checkbox"/>			
	EXCESS LIABILITY	POLICY PERIOD		BODILY INJURY AND PROPERTY DAMAGE (Combined Single Limit)
	<input type="checkbox"/> Umbrella	Effective Date	Expiration Date	Each Occurrence \$
	<input type="checkbox"/> Other			Aggregate \$
	Workers' Compensation and Employers Liability			Part 1 STATUTORY Part 2 BODILY INJURY
				Each Accident \$ Disease Each Employee \$ Disease - Policy Limit \$
POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY (at beginning of policy period)
		Effective Date	Expiration Date	

THE CERTIFICATE OF INSURANCE IS NOT A CONTRACT OF INSURANCE AND NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR ALTERS THE COVERAGE APPROVED BY ANY POLICY DESCRIBED HEREIN.

If any of the described policies are canceled before its expiration date, State Farm will try to mail a written notice to the certificate holder 30 days before cancellation. If however, we fail to mail such notice, no obligation or liability will be imposed on State Farm or its agents or representatives.

Name and Address of Certificate Holder

Syndcore Holdings, LLC
11752 San Vicente Blvd
Los Angeles, CA 90049

Signature of Authorized Representative
JOSEPH EMS INS AGENC 09/26/2018
Title Date

Agent's Code Stamp

AFO Code F372

EXHIBIT "B"



October 9, 2018

Jonathan P. Barger
11 Anna Marie Terrace
Huntingdon Valley, PA 19006

Charlottesville Operations Center
State Farm
1500 State Farm Boulevard
Charlottesville, VA 22909-0001

Re: 2505 Orthodox Street
Philadelphia, Pa 19137

Dear Mr. Barger,

We are writing to you in response to your inquiry regarding your commercial building policy #98ELB2072. We are aware of the contents of the property, specifically the chemicals that are used in the nature of your business, and want to inform you that this does not limit the policy coverage.

Should you have any additional questions please do not hesitate to contact me.

Regards,

Myron Gibson
Sr. Underwriter
1-844-275-7522